

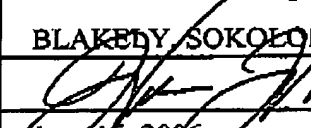
JUN 15 2006

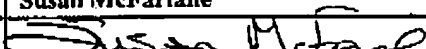
Enclosed are the following documents:

JUN 15 2006

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/751,899
		Filing Date	December 27, 2000
		First Named Inventor	David W. Grawrock
		Art Unit	2165
		Examiner Name	Hassan Mahmoudi
Total Number of Pages In This Submission	4	Attorney Docket Number	42390P9844

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP
Signature	
Date	June 15, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	June 15, 2006

Based on PTO/SB/21 (10-04) as modified by Blakely, Sokoloff, Taylor & Zafman (M) 11/30/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 09/751,899
Filing Date December 27, 2000
First Named Inventor David W. Grawrock
Examiner Name Hassan Mahmoudi
Art Unit 2165
Attorney Docket No. 42390P9844

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☐ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	23*	0	\$0.00
Independent Claims	3	4*	0
Multiple Dependent			
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 360	2203 180	Multiple Dependent claims, if not paid	
1204 750	2204 385	**Reissue independent claims over original patent	
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)		(\$)	0.00

*for number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,650	2254 785	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 600	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 600	Request for oral hearing	
1451 1,510	2401 1,510	Petition to institute a public use proceeding	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
1809 790	1809 385	Filing a submission after final rejection (37 CFR § 1.120(a))	
1810 790	2810 385	For each additional invention to be examined (37 CFR § 1.128(b))	
Other fee (specify)			
SUBTOTAL (2)		(\$)	

SUBMITTED BY

Name (Print/Type) William W. Schaal Registration No. 39,018 Telephone (714) 557-3800
Signature [Signature] Date 06/15/06

Complete (if applicable)

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vfr) 12/15/2004
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

JUN 15 2006

Based on PTO/SB/17 (12-04) as modified by Bishop, Sokoloff, Taylor & Zolman (w/12/15/2004).
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450